



STATE OF MICHIGAN
DEPARTMENT OF EDUCATION
LANSING



JENNIFER M. GRANHOLM
GOVERNOR

THOMAS D. WATKINS, JR.
SUPERINTENDENT OF
PUBLIC INSTRUCTION

August 1, 2004

MEMORANDUM

TO: Local and Intermediate School District Superintendents
Local and Intermediate School Directors of Special Education
Chief Executive Officers of Public School Academies

FROM: Jacquelyn J. Thompson, Ph.D., Director
Office of Special Education and Early Intervention Services

SUBJECT: Family Support Subsidy Program and Proof of Educational Eligibility

Attached to this memorandum is a communication from Ms. Sheri Falvay, Director, Mental Health Services to Children and Families, in the Department of Community Health (DCH), Family Support Subsidy Program. In cooperation with the DCH, and for the benefit of children with disabilities and their families, the Michigan Department of Education is forwarding this information to the parties identified above.

Please further disseminate this information to building principals, school social workers, special education supervisors, parents of students with disabilities, and others who need updated information on the Family Support Subsidy Program.

Attachments

OSE/EIS 04-17

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July 16, 2004

TO: Local and Intermediate School District Superintendents
Local and Intermediate Directors of Special Education
Chief Executive Officers of Public School Academies

FROM: Sheri Falvay, Director
Mental Health Services to Children and Families

SUBJECT: Family Support Subsidy Program and Proof of Educational Eligibility

The Michigan Department of Community Mental Health is responsible for the administration of the Family Support Subsidy (FSS) program, which provides a monthly subsidy to families who have a child with severe disabilities. The FSS Act requires that we utilize the results of testing completed by the public or intermediate school district as a means to determine educational eligibility for the FSS program. Historically, families have been able to provide this documentation or other written verification directly to the local Community Mental Health (CMH) FSS coordinator.

To assure the validity of school documentation, we are now requiring that paperwork used to verify educational eligibility for FSS be forwarded to the CMH agency directly from the public school or intermediate school district. School documentation provided by the family to CMH will no longer be accepted. This change in process will help assure the program's integrity.

Families applying for or renewing their child's eligibility for FSS, will be required to contact their public or intermediate school district and ask that required school documentation be sent directly to the CMH agency's FSS coordinator. As an alternative to sending educational reports, the school could complete the "suggested language to verify educational eligibility for FSS". This language (attached) must be printed on school letterhead and include an authorized signature.

Please help us by communicating this information to all agencies under your jurisdiction.

Your assistance in identifying and advising potentially eligible families of the FSS is appreciated. FSS brochures can be ordered by contacting any county CMH agency or by calling (517) 241-5773. This brochure can also be viewed and downloaded from the Michigan Department of Community Health's web site: <http://www.michigan.gov/mdch>, MDCH Brochures Available for Download.

Questions may be directed to any county CMH agency or Cheryl Thelen, Statewide Coordinator, Family Support Subsidy Program (517) 241-5773 or e-mail thelenc@michigan.gov. Thank you for your continuing assistance.

SF:ct

Attachment

cc: Jacqueline Thompson
David Brock
Patrick Barrie
Irene Kazieczko
Cheryl Thelen

Suggested Language to Identify Students Who Meet Educational Eligibility for the
Family Support Subsidy Program

Please print on school

DATE:

TO: (Community Mental Health Agency)

FROM: (Director of Special Education or Designee)

SUBJECT: Information Needed to Determine Educational Eligibility for the
Family Support Subsidy Program

Student's Name: _____ SSN: _____

The latest MET team report recommends this student eligible for special education services under the
eligibility category of:

_____ Cognitive Impairment (CI)
R340.1705

If the eligibility category is cognitive impairment does the latest intellectual assessment show
development at a rate of 4.5 or more standard deviations below the mean (previously defined as severely
mentally impaired)?
____ Yes ____ No

_____ Severe Multiple Impairment (SXI)
R340.1714

_____ Autism
R340.1715

*If the student's educational eligibility category is autism, R340.1715, the student is receiving
special education programming under special education rule number:*

_____ Programs for Students with Severe Cognitive Impairment R340.1738

_____ Programs for Students with Severe Multiple Impairments R340.1748

_____ Programs for Students With Autism R340.1758